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Bib Data Sheet

CONFIRMATION NO. 1576

<b>SERIAL NUMBER</b> 09/993,780	<b>FILING DATE</b> 11/16/2001 <b>RULE</b>	<b>CLASS</b> 386	<b>GROUP ART UNIT</b> 2613	<b>ATTORNEY DOCKET NO.</b> 14531.71.4.3
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**APPLICANTS**  
John J. Daniels, Seymour, CT;

**\*\* CONTINUING DATA \*\*\*\*\*** *jk*  
THIS APPLICATION IS A CON OF 08/900,417 07/25/1997  
WHICH IS A CIP OF 08/641,517 05/01/1996 ABN  
WHICH IS A CIP OF 08/306,642 09/15/1994  
WHICH IS A CIP OF 08/038,240 03/29/1993 ABN  
WHICH CLAIMS BENEFIT OF 60/014,959 04/08/1996 \*  
(\* ) Data inconsistent with PTO records.

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *none* *jk*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 12/18/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 25	<b>TOTAL CLAIMS</b> 36	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**  
022913

**TITLE**  
Remotely controlling a video recorder *~~~~~*

<b>FILING FEE RECEIVED</b> 1196	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit